

10.10 The Information Collection Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

**TRANSMITTAL
FORM**

(to be used for all correspondence after initial filing)

Total Number of Pages in This Submission

Application Number	09/538,562
--------------------	------------

Filed Date March 29, 2000

First Named Inventor

Act 1 Unit

Examiner Name

16 / Analogocket Number SEDN/247C

SEDN/247CIP1

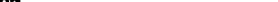
ENCLOSURES (check all that apply)		
<input type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> After Allowance Communication to TC
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input checked="" type="checkbox"/> Amendment / Reply	<input type="checkbox"/> Petition	<input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brif. Reply Brief)
<input checked="" type="checkbox"/> After Final	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Terminal Disclaimer	<input type="checkbox"/> Other Enclosure(s) (please identify below):
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Request for Refund	
<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	
<input type="checkbox"/> Certified Copy of Priority Document(s)		
<input type="checkbox"/> Reply to Missing Parts/ Incomplete Application		
<input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53		
Remarks		
It is believed no fee is due. However, in the event a fee is due, kindly charge that fee to Deposit Account No. 20-0782. To facilitate that charge, a duplicate copy of this letter is enclosed.		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm	Moser, Patterson & Sheridan, LLP		
Signature			
Printed Name	Eamon J. Walsh		
Date	March 21, 2005	Reg. No.	39,414

CERTIFICATE OF TRANSMISSION/MAILING

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Washington, DC 20231-1450 on the date shown below.

Signature		Date	3/21/05
Type or printed name	Carol Wilson		

This collection of information is required by 37 CFR 1.6. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-2122 and select option 2.

IN THE UNITED STATES
PATENT AND TRADEMARK OFFICE

RECEIVED
CENTRAL FAX CENTER
MAR 21 2005

PATENT APPLICATION

Applicant: Gordon et al.
Case No.: DIVA/247CIP1 Confirmation #: 6071
Serial No.: 09/538,562 Filed: 3/29/00
Group Art Unit: 2611 Examiner: Tran, Hai V.
Title: DEMAND-CAST SYSTEM AND BANDWIDTH
MANAGEMENT FOR DELIVERY OF INTERACTIVE
PROGRAMMING

MAILSTOP AF
COMMISSIONER FOR PATENTS
P.O. Box 1450
Alexandria, VA 22313-1450

SIR:

CERTIFICATE OF MAILING OR TRANSMISSION
I hereby certify that this correspondence is being deposited
with the United States Postal Service with sufficient postage
for first class mail in an envelope addressed to: Commissioner
for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, or
being facsimile transmitted to the USPTO, on the date
indicated below.

3-21-05
Date

Clurbo
C-W. Wilson

RESPONSE UNDER 37 C.F.R. 1.116

In response to the final Office Action mailed on February 10, 2005, please consider this application as follows.

The Commissioner is authorized to charge any fees due, including excess claim fees and extension of time fees, to make this response timely and complete to counsel's deposit account No. 20-0782/SEDN/247CIP1.

341112-1